



Date: _____

Location: _____

Presenter: _____

Michigan CSI

Community Seminar Feedback

Thank you for attending. We value your input and hope you will take time to provide feedback. You may also provide feedback to AGCSI@michigan.gov.

1. Is there any topic that you hoped would be covered tonight, that was not?
2. What did you like?
3. What didn't you like?
4. Was the presentation an appropriate length? If not, what length do you recommend?
5. Were the handouts helpful? Yes/No
6. How can we improve the presentation?
7. Was the presenter well prepared and enthusiastic?
8. Did the presenter have sufficient knowledge to answer questions and explain the subject matter effectively?
9. Overall, please rate the **presenter** on a scale from 1 to 5. 1 2 3 4 5
(1 = poor, 2 = needs improvement, 3 = average, 4 = good, 5 = exceptional)
10. Additional feedback or comments:

Optional – Name and contact information: _____

Please return this form to the presenter or mail directly to the following address:



Michigan Attorney General
Consumer Protection Division
Michigan CSI
P.O. Box 30213
Lansing, MI 48909



You are welcome to email any additional questions or feedback to: **AGCSI@michigan.gov**.

www.michigan.gov/ag
1-877-765-8388